2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007344

Entity Name: PHFS BOOSTER CLUB, INC

FILED Jun 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2210 CHENEY HIGHWAY TITUSVILLE, FL 32780 **Current Mailing Address: New Mailing Address:** 2210 CHENEY HIGHWAY TITUSVILLE, FL 32780 FEI Number: 23-3499894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GEORGE, SEAN 2555 ST. PAUL'S DRIVE TITUSVILLE, FL 32780 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition CORCORAN, FRANK CORCORAN, FRANK Name: Name: Address: 4518 WELLINGTON LANE Address: 5528 OAK HOLLOW City-St-Zip: MIMS, FL 32754 City-St-Zip: TITUSVILLE, FL 32780 Title: Title: () Delete () Change () Addition Name: CARTER, LAURIE Name: Address: 5540 BOB WHITE TAIL Address: City-St-Zip: MIMS, FL 32754 City-St-Zip: Title: Title: () Change () Addition () Delete ESPY, PAUL Name: Name: 4820 SQUIRES DRIVE Address: Address: City-St-Zip: TITUSVILLE, FL 32796 City-St-Zip: Title: () Delete Title: () Change () Addition FREY, MICHAEL Name: Name: 1805 APRICOT DRIVE Address: Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: Title: () Delete Title: () Change () Addition KRAFT, DARLENE Name: Name: 4337 CAPER CT Address: Address: City-St-Zip: TITUSVILLE, FL 32796 City-St-Zip: Title: () Delete Title: () Change () Addition CORBIN. TERRY Name: Name: Address: 1590 SINGLETON AVE Address: TITUSVILLE, FL 32796 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SEAN GEORGE RA 06/23/2009